



Version 5/1/06

Veterans Walk for Health Study Final Payment Record

Visit (circle one) 6 other: _____

I, _____ have been paid one \$10 gas card or
\$10 phone card (serial number _____) and a Veterans Walk for Health t-shirt, given to
me by _____ for my participation in the Veterans Walk for Health Study.

Participant SIGNATURE

Study representative SIGNATURE

Participant (print name)

Study representative (print name)

____/____/____
Date

____/____/____
Date



Veterans Walk for Health Study Final Payment Receipt

Visit (circle one) 6 other: _____

I, _____ have been paid one \$10 gas card or
\$10 phone card (serial code number _____) and a Veterans Walk for Health t-shirt, given
to me by _____ for my participation in the Veterans Walk for Health Study.

Participant SIGNATURE

Study representative SIGNATURE

Participant (print name)

Study representative (print name)

____/____/____
Date

____/____/____
Date